U.S.	Departm	ent of J	ustice
United	d States	Marshal	s Service



PROCESS RECEIPT AND RETURN
See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

		COURT CASE NUMBER	<u></u>
LAINTIFF Edna Lewis Ramey		08 CV 135	
EFENDANT		TYPE OF PROCESS	
4 1 W W-124		s/c	Appropriate April 1971
ERVE ( NAME OF INDIVIDUAL, COMPANY, CORPORAT	TION, ETC., TO SERVE OR I	DESCRIPTION OF PROPERTY TO	SBIZE OR CONDEMN
- Hadrad States Attorney			<del></del> -
ADDRESS (Street or RFD, Apartment No., City,			
AT 219 S. Dearborn 5th Floor, Chi			
NO NOTICE OF SERVICE COPY TO REQUESTER AT NAME AN	ND ADDRESS BELOW:	Number of process to be	
		I served with this Form - 285	1
Edna Lewis Ramey		Number of action to be	
739 Countryside Dr.		Number of parties to be served in this case	3
Bolingbrook, IL 60490			<del></del>
1		Check for service	1
		U.S.A.	<u></u>
PECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL	LASSIAN IN THE EDITING	ENVICE (Include Business and A	
plephone Numbers, and Estimated Times Available For Service):			Fold
<b></b>	MAR 2 4 2008	MAR - 4 0000	
	-tC	MAR 2 4 2008	
	MICHAEL W. DOBB		
a	LERK, U.S. DISTRICT (	COURT	
Signature of Attorney or other Originator requesting service on behalf of:		TELEPHONE NUMBER	DATE
			03-10-08
	-		W THE VENT
SPACE BELOW FOR USE OF U.S. MARS	HAL ONLY — DO	MOT MKILE RETO	
acknowledge receipt for the total Total Process District Distr	rict Signature of Author	rized USMS Deputy or Clerk	Td Date
number of process indicated of Origin to Sc			03-10-08
Sign only first USM 285 if more 3 of 3 No. 24 No.	24		
	evidence of service have ex	xecuted as shown in "Remarks", the s	process described
in the individual, company, corporation, etc., at the address shown above	e or on the mentioner, company	,, co.pole	
I hereby certify and return that I am unable to locate the individu			
Name and title of individual served (if not shown above)		A person of s	unitable age and dis-
JENIO TIII OLI IIMITAIMME MOLACTI (IL IMA MIRAMI RODACI		cretion then re usual place of	esiding in the defendant's
1 - 1 10 100 1 1		Date of Service	Time am
Address (complete only if different (han shown above)		1111	3:45
		3/20/18	<u> </u>
		Signature, of U.S.	Marshal or Deputy
Service Fee Total Mileage Charges Porwarding Fee Total Ch	narges Advance Deposits	Amount owed to U.S. Marshal or	Arrown of Refund
(XOV) (including ondervors)		CHX M/)	<del>-()</del>
		70.00	<del></del>
REMARKS: 3/20/08 Duccessfully Dervid 1005m 1Hour Om	1 Rossie dh	1 Thoulen Mus	auski Ker
3/20/08 Duccessfully Dervia	c. necessed p	y July // //	,/ ===
VI-11- 0.11 J		<i>,</i> •	
IDUSM I How UM	ucree		
A MARK WILL A PARTIES	0		
			1/034 106 /Day 17/15/90

PRIOR EDITIONS MAY BE USED

1. CLERK OF THE COURT

FORM USM-285 (Rev. 12/15/90)